

SR 29 Work Group

Reducing Primary Care Use of Hospital
Emergency Departments

→
EMERGENCY

→ Emergency
Patient Parking

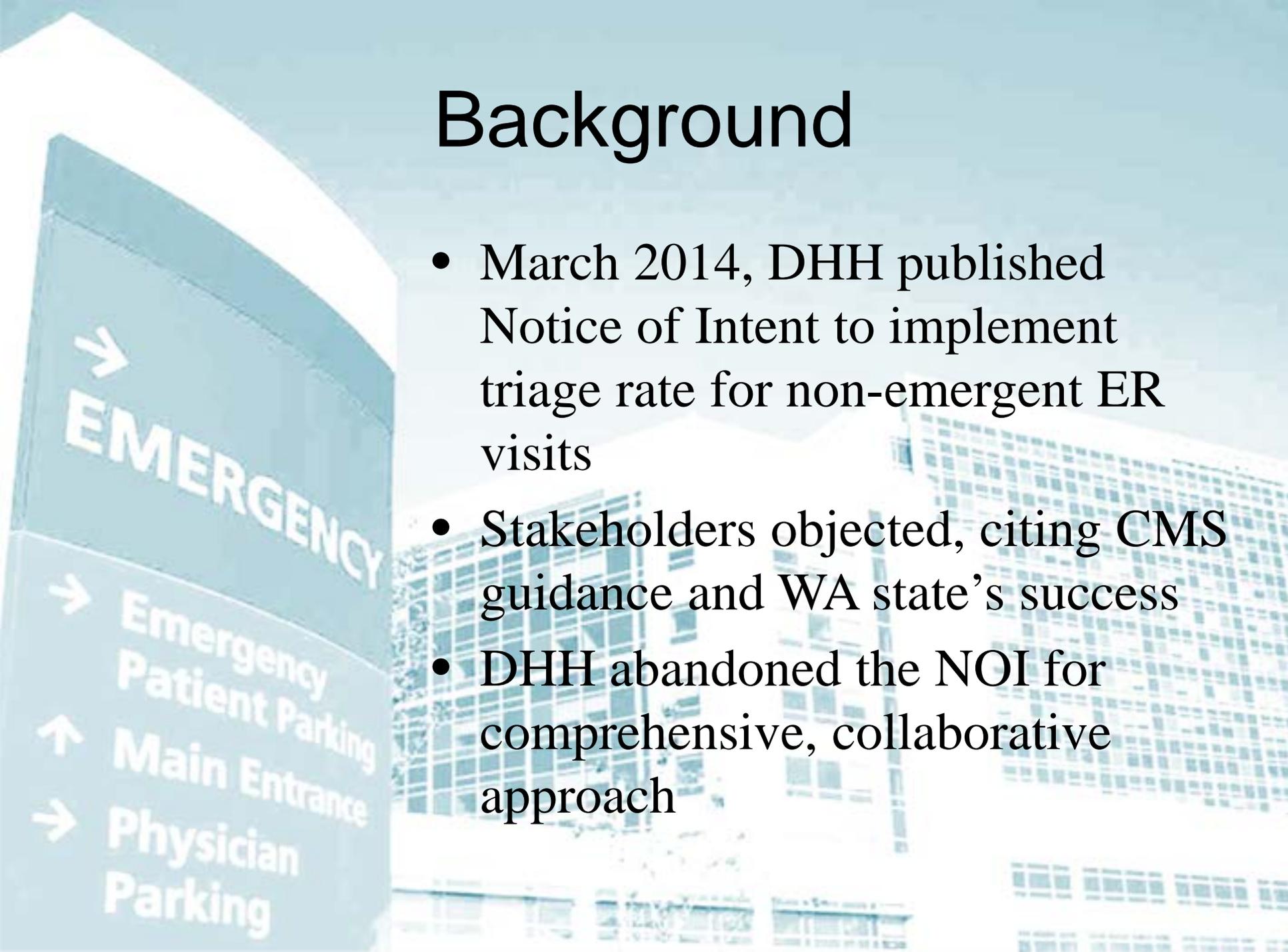
↑ Main Entrance

→ Physician
Parking

August 22, 2014

Background

- March 2014, DHH published Notice of Intent to implement triage rate for non-emergent ER visits
- Stakeholders objected, citing CMS guidance and WA state's success
- DHH abandoned the NOI for comprehensive, collaborative approach



ED Work Group

- Partnership of hospitals, health plans, physicians, pharmacists
- Weekly meetings April through June, biweekly since August
- Leverages WA State's "ER is for Emergencies" initiative, Seven Best Practices

A large, multi-section directional sign for a hospital. The top section is dark blue with a white arrow pointing right and the word "EMERGENCY" in white capital letters. Below it, the sign is lighter blue and contains three sections: "Emergency Patient Parking" with a right-pointing arrow, "Main Entrance" with an upward-pointing arrow, and "Physician Parking" with a right-pointing arrow. The background shows a modern hospital building with a grid of windows.

→
EMERGENCY

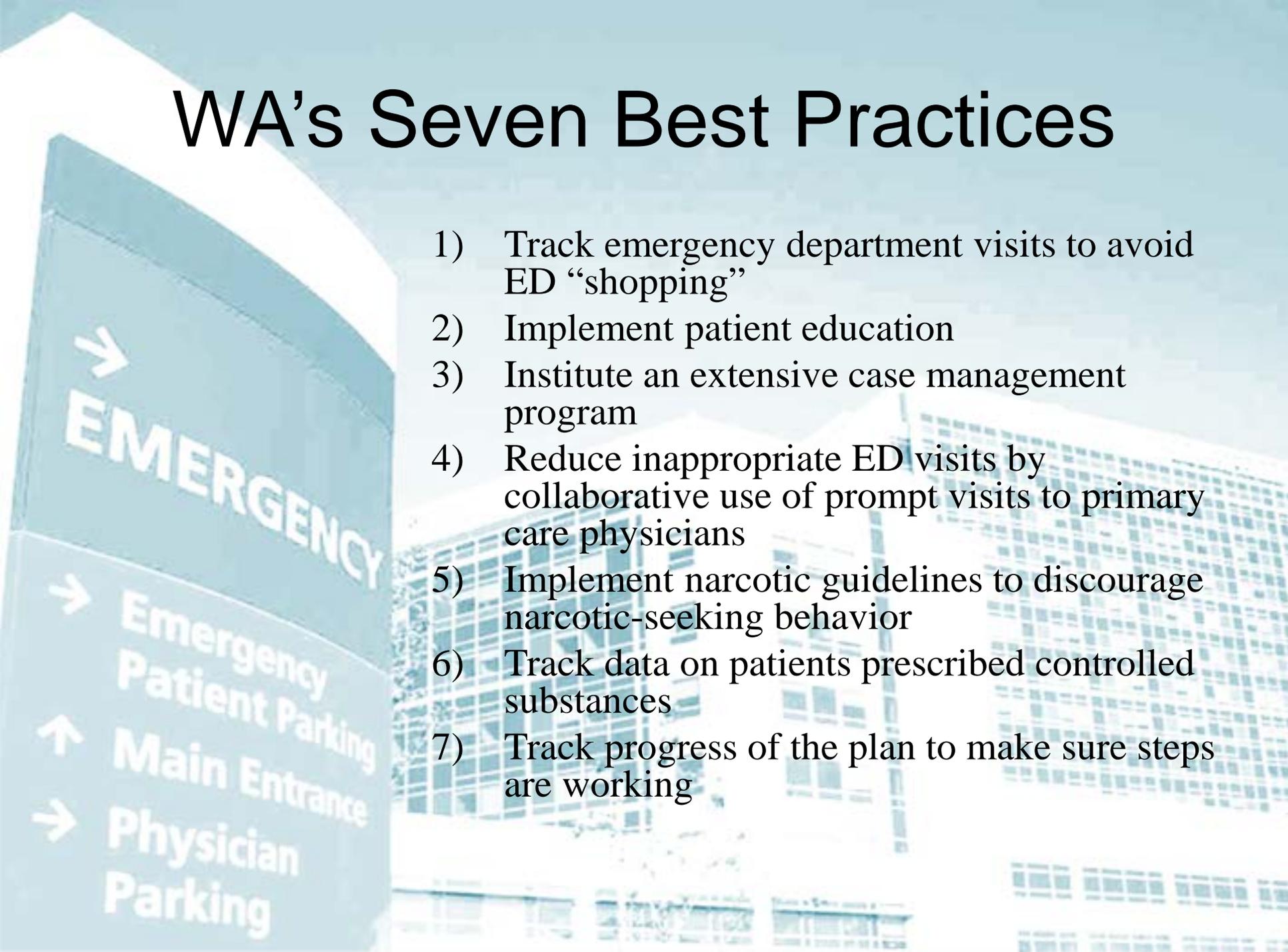
→ Emergency Patient Parking

↑ Main Entrance

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WA's Seven Best Practices

- 1) Track emergency department visits to avoid ED “shopping”
- 2) Implement patient education
- 3) Institute an extensive case management program
- 4) Reduce inappropriate ED visits by collaborative use of prompt visits to primary care physicians
- 5) Implement narcotic guidelines to discourage narcotic-seeking behavior
- 6) Track data on patients prescribed controlled substances
- 7) Track progress of the plan to make sure steps are working



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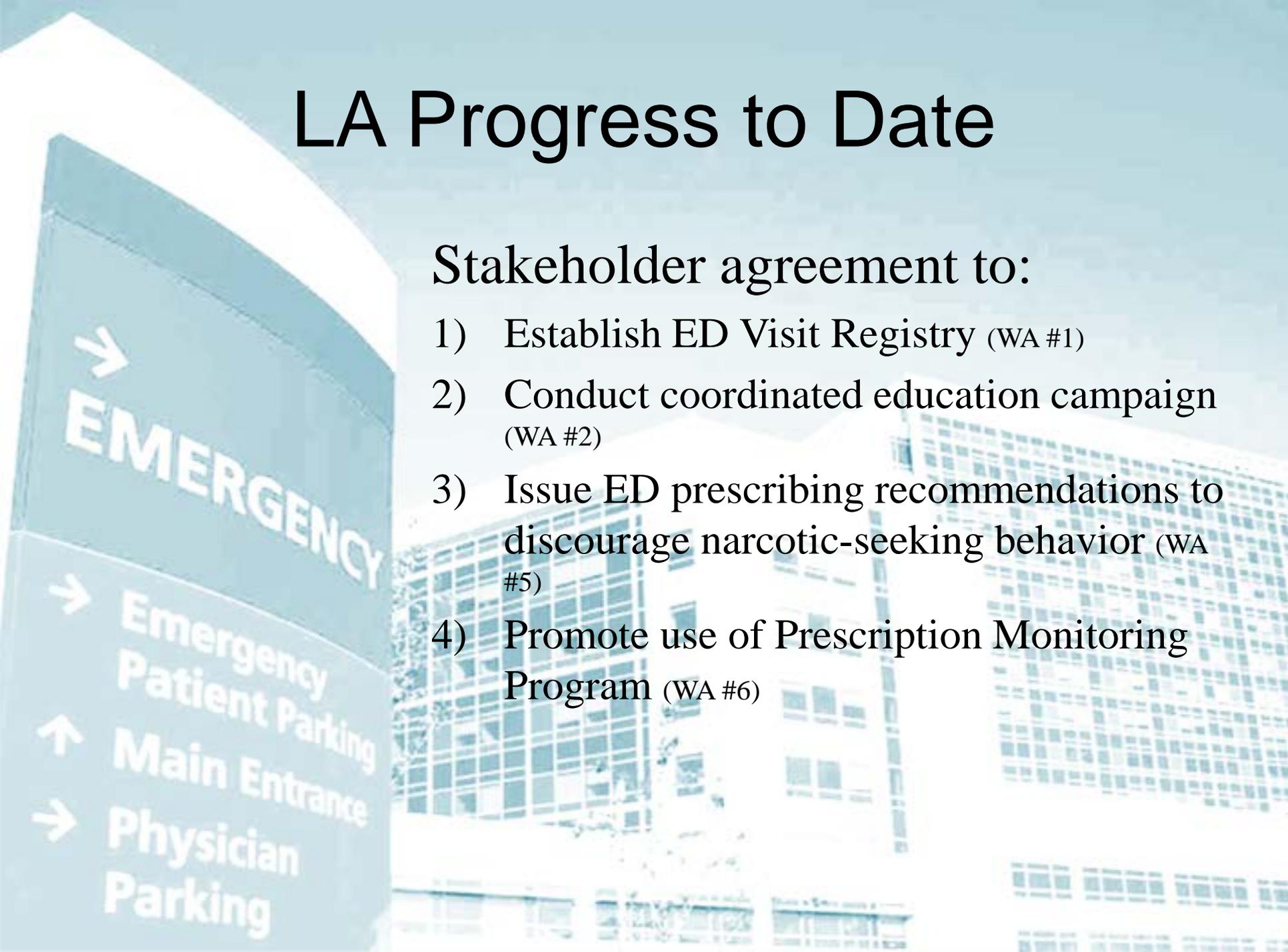
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LA Progress to Date

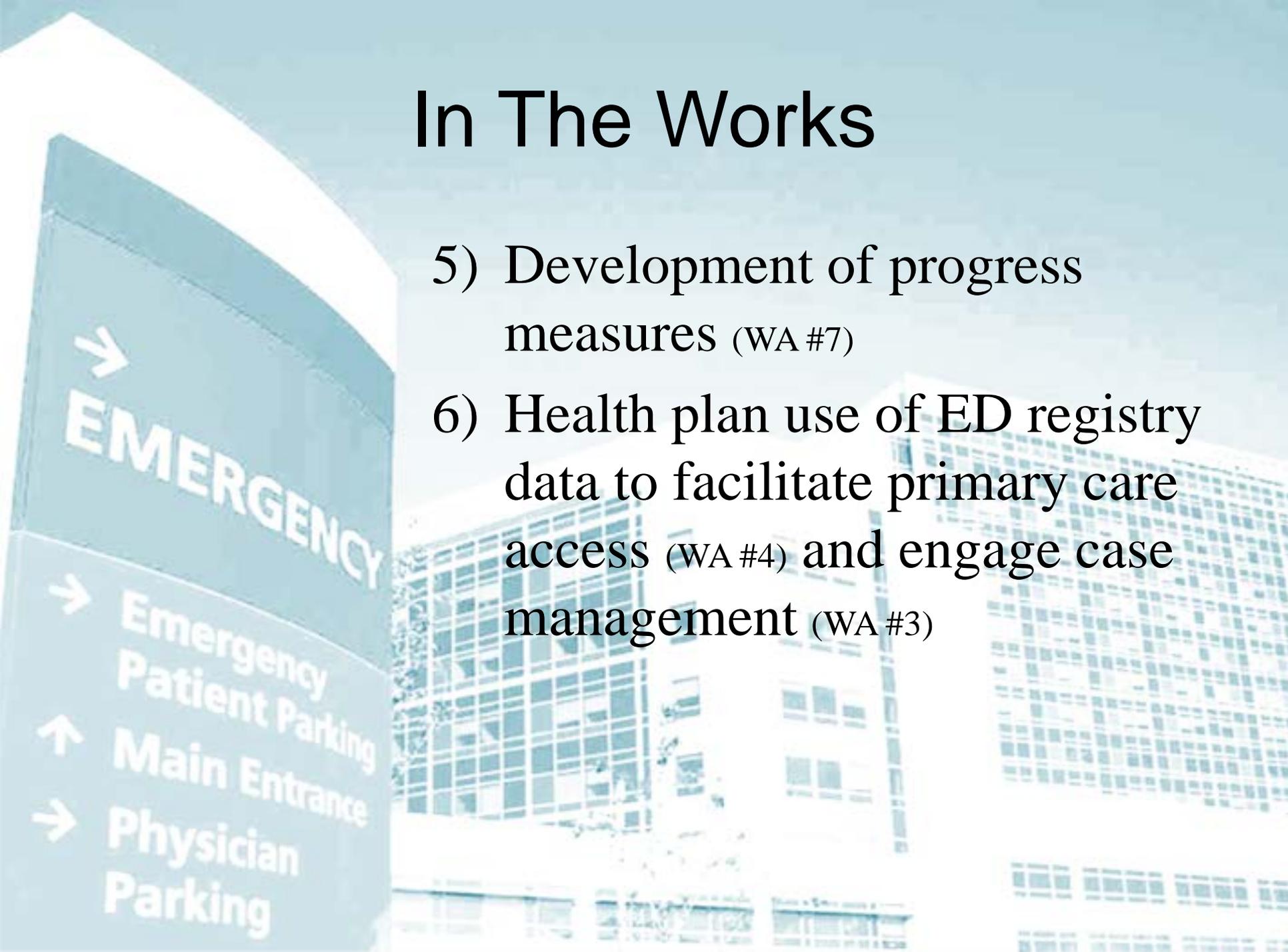
Stakeholder agreement to:

- 1) Establish ED Visit Registry (WA #1)
- 2) Conduct coordinated education campaign (WA #2)
- 3) Issue ED prescribing recommendations to discourage narcotic-seeking behavior (WA #5)
- 4) Promote use of Prescription Monitoring Program (WA #6)



In The Works

- 5) Development of progress measures (WA #7)
- 6) Health plan use of ED registry data to facilitate primary care access (WA #4) and engage case management (WA #3)



For More Information

WA State model:

<http://www.wsha.org/eremergencies.cfm>

DHH work group:

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